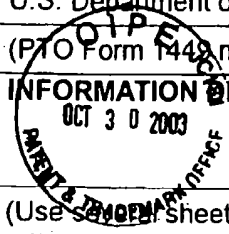


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|---|-----|---|------------|----------------------------------|--------------------------------|--------------------------|-------------------------------------|--------------------------|
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| INFORMATION DISCLOSURE STATEMENT BY APPLICANT  | | | | Applicant Tepman, A. | | Confirmation No.: | | |
| (Use separate sheets if necessary) | | | | Filing Date 09/05/2003 | | Group | | |
| Examiner | | | | | | | | |
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| | | | | | | | YES | NO |
| <i>Mr</i> | B1 | 59-215484 | 12/05/1984 | JP | C23c0 | 15/00 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | B2 | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | B3 | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | B4 | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | B5 | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
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| *EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with your communication to applicant. | | | | | | | | |